<i>S</i>		Applic	ation Number	09/851,62	22		
TRANSMITTAL FORM			Filing Date		May 8, 2001		
			First Named Inventor		Ejaz UI Haq		
(to be used for all correspondence after initial filing)  Total Number of Pages in This Submission		Group	Group Art Unit		2816		
		Examiner Name		Dinh Le			
		Attorne	y Docket Number	44176.00033			
	ENCLO	DSURES	(check all that apply)				
Fee Transmittal Form (in duplicate)	Assignment and Recordation Cov Sheet (for an Application)			Reque	st to Correct Filing Receipt		
Amendment / Response		g(s)		Appeal Communication to Board o			
☐ With RCE	ng-related	l Papers		Communication to Group Notice, Brief, Reply Brief)			
After Final	for Pate		val of an Application loned Unintentionally .137(b)	Return Postcard			
Affidavits/declaration(s)			tinued Examination	☐ Status	Letter		
Extension of Time Request (3 mos.)       □ Power (     (in duplicate)			у		Enclosure(s) identify below):		
Reference(s)		al Disclair	ner				
		Request for Refund					
☐ IDS and Form 1449 ☐ CD, Nu		mber of C	CD(s)				
Certified Copy of Priority Document(s)  Remar							
Response to Missing Parts/ Incomplete Application							
Declaration/Oath				-			
SIGNA	TURE OF A	APPLICA	NT, ATTORNEY, O	R AGENT			
Firm Daryl C. Josephson	-						
or Squire, Sanders & Dempsey, L.L.P. Individual name 600 Hansen Way							
Palo Alto, CA 943	04-1043	A					
Signature	<i>' C.</i>	Jose	y land				
Date April 3, 2003							
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Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known 09/851,622 May 8, 2001 Ejaz UI Haq **Examiner Name** Dinh Le Group / Art Unit 2816 OFFICE OF PETITIONS 44176.00033 Attorney Docket No.

MCTUOD OF DAVMENT (1)				FFF CALCULATION (continued)							
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)  3. ADDITIONAL FEES							
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None											
Order			Large Entity Small Entity								
Deposit Account:			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid			
Deposit - Account 05-0150		1051	130	2051	65	Surcharge - late filing fee or oath					
Number			1052	50	2052	25 .	Surcharge - late provisional filing fee or cover sheet.				
Deposit Account Squire, Sanders & Dempsey, L.L.P.			1053	130	1053	130	Non-English specification				
			1812	2,520	1812	2,520	For filing a request for reexamination				
Name The Commissioner is authorized to: (check all that apply)				920*	1804	920*	Requesting publication of SIR prior to Examiner action				
⊠ Charge fee(s) indicated below ⊠ Credit any overpayments     ⊠ Charge any additional fee(s) during the pendency of this application			1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
☐ Charge fee(s) indicated below, except for the filing fee			1251	110	2251	55	Extension for reply within first month				
to the above-identified deposit account.  FEE CALCULATION			1252	410	2252	205	Extension for reply within second month				
1. BASIC FIL	· · · · · · · · · · · · · · · · · · ·		1253	930	2253	465	Extension for reply within third month	930			
Large Entity	Small Entity		1254	1,450	2254	725	Extension for reply within fourth month				
	ee Fee <u>Fee Description</u> code (\$) Fee Paid		1255	1.970	2255	985	Extension for reply within fifth month				
(")		1	1401	320	2401	160	Notice of Appeal				
		-	1402	320	2402	160	Filing a brief in support of an appeal				
	002 165 Design filing fee 003 260 Plant filing fee		1403	280	2403	140	Request for oral hearing				
1004 750 2	004 375 Reissue filing fee	1	1451	1,510	1451	1,510	Petition to institute a public use				
1005 160 2	005 80 Provisional filling fee	]	1452	110	2452	55	Petition to revive – unavoidable				
SUBTOTAL (4)		1	1453	1,300	2453	650	Petition to revive – unintentional	1,300			
SUBTOTAL (1) (\$) 0			1501	1,300	2501	650	Utility issue fee (or reissue)				
2. EXTRA CLAIM FEES			1502	470	2502	235	Design issue fee				
	Extra Fee from Fee		1503	630	2503	315	Plant issue fee				
Total Claims		1	1460	130	1460	130	Petitions to the Commissioner				
Independent		1	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)				
Claims	-3 ** = 0 X = 0		1806	180	1806	180	Submission of Information Disclosure Stmt				
Multiple Dependent	x = 0		8021	40	8021	40	Recording each patent assignment per property (times number of				
Large Entity	Small Entity						properties)				
Fee Fee Code (\$)	Fee Fee <u>Fee Description</u> Code (\$)		1809	750	2809	375	Filing a submission after final rejection (37 CFR § 1.129(a))				
1202 18 1201 84	2202 9 Claims in excess of 20 2201 42 Independent claims in excess of 3		1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))				
1203 280	2203 140 Multiple dependent claim, if not paid		1801	750	2801	375	Request for Continued Examination (RCE)				
1204 84	1204 84 2204 42 ** Reissue independent claims over original patent			900	1802	900	Request for expedited examination				
1205 18	2205 9 ** Reissue claims in excess of 20 a	nd.					of a design application				
	over original patent		Other fee (specify)								
	SUBTOTAL (2) (\$) 0		Julio 16	opeon	.,,	•					
	(4) 5		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (6) 2 220								
**or number prov	aught paid, if greater: For Baissuce, see above			,		,	(\$) 2,2	30			

SUBMITTED BY Complete (if applicable)							
Name (Print/Type)	Daryl C. Josephson	Registration No. Attorney/Agent) 37,365	Telephone	(650) 856-6500			
Signature	Dayl C.	Josephin	Date	April 3, 2003			

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